#### Remarks

The response is timely because it is filed within the two month period for reopening prosecution after a Board decision raising one or more new grounds of rejection (two are raised here).

### 35 U.S.C. 112, First Paragraph (Written Description)

Pages 19-22 of the Board decision enter a new ground of rejection of claims 1, 2, and 5-64, based on alleged lack of support in the original specification for the "without data processing" limitations of those claims. The Applicant does not concede this point, but has addressed the new ground of rejection by amending the claims as presented above to remove the "without data processing" limitation. Therefore, this rejection is seen to be overcome. Support for claims 1, 19, and 30 as presently amended is shown below.

## 35 U.S.C. § 103(a) (Obviousness)

Claims 1,19, and 30 and their dependent claims 5-18, 20-29, and 31-64 are pending in the present application. The proposed rejection from the Board is found in the Board decision Mailed February 26, 2010 ("Board Decision").

The Board decision, p.11, item 46, notes that "Neither Segal nor Joao discloses ... employing a 'service provider' to induce a patient to perform certain actions." Claim 1 requires the service provider to carry out the following elements not shown by the applied prior art:

- "A. inducing said patient to receive said medical record from a covered entity in a first format:
- B. inducing said patient to convert said medical record to a storage format by summarizing, abstracting, retyping, redacting, supplementing, organizing, or selecting the medical record, without the service provider modifying the

information or its format in the medical record, wherein said storage format is different from said first format."

The Board decision reasons that the service provider inducing the patient to receive and pass on an unmodified medical record is obvious, but the claims have been changed to require Step B of claim 1 as recited above, or its counterpart in claims 19 and 30. It is not obvious from the cited prior art for a service provider, who is neither the physician providing the original records nor the patient, to induce the patient to obtain his or her original records, induce the patient to modify the original records, receive the modified records, and distribute the modified records to third parties as directed by the patient, without further changes. The Joac and Siegel prior art do not show the patient modifying the records. In both items of prior art, any modifications are made by a service provider or physician. This in effect creates new medical records, which are then covered by HIPAA.

## 35 U.S.C. § 132 (Amendments Supported)

Claims 1, 19, and 30 of the present application as amended are shown in the left column below. Each amendment finds support as stated in the right column below.

Support for amended claim 1

A method for a service provider to obtain a medical record of a patient from a covered entity in a form allowing said service provider to quickly disclose said medical record to a third party without restriction by the Health Insurance Portability and Accountability Act of 1996, the method comprising the following steps carried out by a service

provider that is not the patient or a	
covered entity:	
A. inducing said patient to receive	Claim 1 as submitted on appeal, this
said medical record from a covered	portion not rejected re written
entity in a first format;	description, except adding "in a first
	format." See also Par 0026 of the
	specification, which states, in relevant
	part:
	"The communication interface of the
	system may be adapted to induce a
	patient to obtain possession of a
	medical record in a first format and
	then convert the medical record to a
	storage format different from the first
	format."
B. inducing said patient to convert said	From claim 2, this portion not rejected
medical record to a storage format,	re written description, see also Par
	0026 of the specification, which states,
	in relevant part:
	"The communication interface of the
	system may be adapted to induce a
	patient to convert the medical record
	to a storage format different from the
	first format."
by summarizing, abstracting, retyping,	Par 0016 and 0052 of the specification,
redacting, supplementing, organizing,	which state, in relevant part:
or selecting the medical record,	[0016] * * * "As another example, the

> patient can provide to the service provider a record that has been summarized, abstracted, retyped. redacted, supplemented. otherwise modified from its original form. [0052] \* \* \* By obtaining the agreement in advance, the patient can search for, obtain, and organize the records thoroughly and accurately, select what information to make available. and/or transmit information in a suitable format to the service provider so it will be available and arranged in good order in an emergency.

without the service provider modifying the information or its format in the medical record Par 0020 of the specification, which states, in relevant part:

"[0020] The service provider then stores or induces the patient to store the medical record in a memory. The medical record is stored in a form from which it can be reproduced in the storage format as received from the patient. \* \* \* The intention here is to avoid the need for the service provider to modify the information or its format

	in a way that could be interpreted as
	"data processing," as discussed in
	HIPAA."
wherein said storage format is different	From claim 2, this portion not rejected
from said first format	re written description. See also Par
	0026 of the specification, which states,
	in relevant part:
	"The communication interface of the
	system may be adapted to induce a
	patient to convert the medical record
	to a storage format different from the
	first format."
C. receiving said medical record	Claim 1, part B, as submitted on
from said patient in said storage	appeal, this portion not rejected re
format;	written description. See also Par.0025
	of the specification, which states in
	relevant part:
	"The communication interface can be
	used for acquiring the medical
	record from the patient in a storage
	format."
D. storing said medical record in a	Claim 1, part C, as submitted on
memory in a form from which said	appeal, this portion not rejected re
medical record can be reproduced in	written description
said storage format;	
E. obtaining agreement in advance	Claim 1, part D, as submitted on

with the patient that the service	appeal, this portion not rejected re
provider shall transmit said medical	written description
record to a third party	
in the storage format as received from	Par 0038 of the specification, which
the patient	states, in relevant part:
	"[A] medical file storage system based
	on the present invention copies, stores,
	retrieves, and delivers medical
	information <u>in the storage format as</u>
	received from the patient"
under defined conditions; and	Claim 1, part D, as submitted on
	appeal, not rejected re written
	description
F. transmitting said medical record	Claim 1 as submitted on appeal, not
to a third party	rejected re written description
in the storage format as received from	Par [0038] of the specification, which
the patient	states, in relevant part:
	"[A] medical file storage system based
	on the present invention copies, stores,
	retrieves, and delivers medical
	information in the storage format as
	received from the patient"
when the defined conditions occur.	Claim 1 as submitted on appeal, not
	rejected re written description

Support for Claim 19

19. A method to induce conversion of a Claim 19 as submitted on appeal, not medical record of a patient from a rejected re written description. covered entity to a form allowing quick disclosure of said medical record to a third party without restriction by the Health Insurance Portability Accountability Act of 1996, the method comprising:

A. a service provider that is not the patient or a covered entity, inducing said patient to possession of said medical record from a covered entity:

B. said service provider inducing said patient to convert said medical record into a storage format

by summarizing, abstracting, retyping, redacting, supplementing, organizing, or selecting the medical part: record, without the service provider [0016] \* \* \* "As another example, the modifying the information or its format patient can provide to the service in the medical record, wherein said storage format is different from said first format: and

Par 0016, 0052, and 0020 of the specification, which state, in relevant

provider a record that has been summarized, abstracted, retyped, redacted. supplemented. otherwise modified from its original form.

100521 \* \* By obtaining the

> agreement in advance, the patient can search for, obtain, and organize the records thoroughly and accurately, select what information to make available and/or transmit information in a suitable format to the service provider so it will be available and arranged in good order in an emergency.

> "[0020] The service provider then stores or induces the patient to store the medical record in a memory. The medical record is stored in a form from which it can be reproduced in the storage format as received from the patient. \* \* \* The intention here is to avoid the need for the service provider to modify the information or its format in a way that could be interpreted as "data processing," as discussed in HIPAA."

said patient to store said medical rejected re written description. record in a memory in said storage format

said service provider inducing Claim 19 as submitted on appeal, not

Support for Claim 30

30. (Currently amended) A medical and personal information system for obtaining and storing a medical record of a patient from a covered entity in a form allowing quick disclosure of said medical record to a third party without restriction by the Health Insurance Portability and Accountability Act of 1996, the system comprising:

Claim 30 as submitted on appeal, not rejected re written description.

A. a communication interface provided at least in part by a service provider that is not the patient or a covered entity, said interface being adapted for inducing said patient to obtain possession of said medical record of said patient from a covered entity

and to induce said patient to convert Par 0016, 0052, and 0020 of the said medical record to a storage format by summarizing, abstracting, retyoing, part:

and to induce said patient to convert said medical record to a storage format by summarizing, abstracting, retyping, redacting, supplementing, organizing, or selecting the medical record, without the service provider modifying the information or its format in the medical record, wherein said storage format is different from said first format;

[0016] \* \* \* "As another example, the patient can provide to the service provider a record that has been summarized, abstracted, retyped, redacted, supplemented, ... or otherwise modified from its original form.

	[0052] * * * By obtaining the
	agreement in advance, the patient can
	search for, obtain, and organize the
	records thoroughly and accurately,
	select what information to make
	<u>available</u> , and/or transmit the
	information in a suitable format to the
	service provider so it will be available
	and arranged in good order in an
	emergency.
	"[0020] The service provider then
	stores or induces the patient to store
	the medical record in a memory. The
	medical record is stored in a form from
	which it can be reproduced in the
	storage format as received from the
	patient. * * * The intention here is to
	avoid the need for the service provider
	to modify the information or its format
	in a way that could be interpreted as
	"data processing," as discussed in
	HIPAA."
	Claim 30 as submitted on appeal, not
ed	rejected re written description.
der	
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and

B. a data storage device provided at least in part by a service provider that is not the patient or a covered entity, said storage device comprising a

memor	adapte	ed for	storing	said		
medica	record in	n a form	from wh	nich it		
can be reproduced in a storage format,						
whereir	said	storage	devic	e is		
configu	red to sto	re said r	nedical r	ecord		
in said	storage fo	rmat.				

The amendments in this paper are therefore free of new matter.

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#### Conclusion

In view of the above remarks, the applicant respectfully requests reconsideration and allowance of all the pending claims (1-2 and 5-64).

The Commissioner is hereby authorized to charge any additional fees, or credit any overpayment, to Deposit Account No. 13-0017.

Respectfully submitted,

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